	Effective November 10, 1998									09	· ~ `	x z]	7-	`	
	CLAIMS AS FILED - PART I								0144			ر د ر	•		
ł	FOR	(Column 1) (Column 2) NUMBER FILED NUMBER FXTRA								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
ŀ	BASIC FEE		NON	DEH FILE	J	NUMBE	REXTRA		RAT	E FE		RA'		FEE	
-			2.10 2.4월 (2년)22	Villa Care		N. C. SEMERAL				380	00	OR I		760.00	
L	TOTAL CLAIM	S) min	us 20=	•	K		X\$ 9			*********	Transfer		
H	INDEPENDENT CLAIMS 5 minus 3 = 4								X39=		-1°	R X\$1			
Ľ	MULTIPLE DEPENDENT CLAIM PRESENT										_ 0	R X78	=		
[*	If the difference in column 1 is loss than								+130:	=	0	R +260	=		
	* If the difference in column 1 is less than zero, enter "0" in column 2											R TOTA			
	(Column 1) (Column 2) (Column 3)												ER TH	IΔN	
		CL	VMS		(Co	olumn 2) IGHEST	(Column 3	3)	SMAL	LENTIT			L EN		
AMENDMENT		AF AMENI	UNING TER DMENT		PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI TIONA FEE	\L	PATE	E TI	ADDI- ONAL FEE	
ENG	Total	12	<u> </u>	Minus	**	21	=		X\$ 9=	ř.	OF	X\$18			
AM	Independent		IOFN	Minus	***	5	= ()		X39=	 		` 	- ' -		
	FIRST PRES	SENTATION	V OF W	ULTIPLE D	EPENDE	NT CLAIM]		-	- OF	^/0=			
							-		+130=		OR	+260=			
		40 •						A	TOTAL DDIT, FEE		OR	TOTA ADDIT, FE			
	Alterial Same	(Colum		Para Charge		umn 2)	(Column 3)								
MENT B		AFTI AMEND	ER		NU PRE	IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL	
AMENDMENT	Total	*		Minus	**		=		X\$ 9=		1	X\$18=		EE	
	Independent	*		Minus	***	¢	=	-	<u>`</u>		OR		-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								X39=	1)	OR	X78=		·	
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	:							Δ.	TOTAL DIT. FEE	7	OR	TOTA		-	
-	The second second	(Colum			(Colu	mn 2)	(Column 3)	· AL	VIII. FEE			ADDIT, FEE		-	
د		CLAIM REMAIN	ING		HIGH	HEST ABER		Г	1	ADDI-			T 45		
AMERICAL		AFTE AMENDM			PREV	OUSLY	PRESENT EXTRA		RATE.	TIONAL		RATE	AD TIO		
2	Total	*		Minus	**		=	-		FEE			FE	E	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								(39=		OR	X78=			
		+	130=			+260=									
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR L	TOTAL		_	
	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													_	
			,u	(.o.a.u.	reheix)	eny is vie fi	ynest number	found i	n the appr	opriate box	in colui	ma 1.			
I MI	PTO-875														

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number